



Attorney's Docket N.: 06975-079001 / Network 03

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Brian Sullivan et al. Art Unit : 2144  
Serial No. : 09/750,027 Examiner : Tam T. Phan  
Filed : December 29, 2000 Confirmation No.: 6434  
Title : ELECTRONIC INFORMATION CACHING

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

AMENDMENT IN REPLY TO ACTION OF AUGUST 9, 2004

Please amend the above-identified application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 15 of this paper.

11/10/2004 SDENB0B1 00000015 09750027

)1 FC:1202

144.00 OP

12/21/2004 SFORD1 00000003 061050 09750027

01 FC:1201 88.00 DA

02 FC:1202 18.00 DA

PATENT APPLICATION FEE DETERMINATION RECORD  
Effective October 1, 2000

Application or Docket Number

09750887  
06975-079887

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS	<b>44</b>	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	<b>44</b> minus 20 =	<b>24</b>
INDEPENDENT CLAIMS	<b>3</b> minus 3 =	<b>0</b>
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

\* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
			..	=
	Total	101	44	17
	Independent	5	3	2
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>	

SMALL ENTITY  
TYPE  OTHER THAN  
OR SMALL ENTITY

RATE	FEES	RATE	FEES
BASIC FEE	355.00	OR BASIC FEE	710.00
X\$ 9=		OR X\$18=	432.00
X40=		OR X80=	
+135=		OR +270=	
TOTAL		OR TOTAL	142.00

OTHER THAN  
SMALL ENTITY

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		OR X\$18=	204
X40=		OR X80=	168
+135=		OR +270=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	474

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
			..	=
	Total	54	61	-
	Independent	4	5	-
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>	

RATE	ADDITIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL ADDIT. FEE	

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
			..	=
	Total	70	61	9
	Independent	6	5	-
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>	

RATE	ADDITIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	162
X80=	88
+270=	
TOTAL ADDIT. FEE	250

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.